



State of New Jersey Non-Participating Manufacturer's Sales Information

	Company Name									
Mailing Address	· · ·									
City		State			Zip Code		Country			
Phone				Fax						
Name and title of person completing this form										
Mail-to Address (if different from above)										
Name										
Mailing Address										
City		State			Zip Code		Country			
Phone		Fax			E-Mail	E-Mail				
Certification Year										
2015 for sales made in 2014		Other:								
Instructions for the Manufacturer ("You"): (Attach Addendum pages as necessary)										
Instructions for the Manufacturer: List each distributor, wholesale dealer and retailer which sells your product(s) in the State of New Jersey. For each distributor, wholesale dealer and retailer, provide the sales volume according to your records for each brand name and family for the liability year and provide copies of invoices or other documents that support the sales volume listed. In addition, provide the name, address, and phone number for the contact person at each distributor, wholesale dealer and retailer provided. Finally provide information regarding flavoring; identify flavors other than menthol, clove or tobacco. You must retain all invoices and documentation of sales and other information relied upon for a period of 5 years, unless otherwise required by law to maintain them for a greater period of time.										
provided. Finally provi	de information	ress, and pression reg	ohone num garding fla	nber for the calvoring; identifications and other	ontact person a tify flavors oth	ocuments that sup at each distributor er than menthol, c	port the sales volume listed. In , wholesale dealer and retailer love or tobacco.			
provided. Finally provi	de information de inf	ress, and pression reg	ohone num garding fla station of s eater perio	nber for the covoring; identifications and other documents and other documents.	ontact person a tify flavors oth	ocuments that sup at each distributor er than menthol, c	port the sales volume listed. In , wholesale dealer and retailer love or tobacco.			
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^{*}In no event shall cigarettes or any component part thereof that causes a cigarettes or smoke from that product to have a characterizing flavor other than tobacco, clove or menthol to be sold or advertised in this State. N.J.S.A. 2A: 170-51.6



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Distributor / Wholesale dealer / Retailer	Brand Name	Brand Family	Check One	Flavoring* (Identify flavors other than Menthol, Clove or Tobacco)
			☐ Cigarette ☐ RYO	
			☐ Cigarette	
			☐ Cigarette☐ RYO	
			☐ Cigarette	
			☐ Cigarette☐ RYO	

^{*}In no event shall cigarettes or any component part thereof that causes a cigarettes or smoke from that product to have a characterizing flavor other than tobacco, clove or menthol to be sold or advertised in this State. N.J.S.A. 2A: 170-51.6